

Article

Arab Teachers' Well-Being upon School Reopening during COVID-19: Applying the Job Demands–Resources Model

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Abstract: Once the major threat of the COVID-19 pandemic diminished, schools reopened, and teachers once again had to cope with unprecedented challenges. The impact of these challenges on the emotional well-being of Arab teachers, who have a unique set of challenges within the Israeli school educational system, has received little attention in the recent literature. In this cross-sectional study, we examined 300 Arab teachers' well-being in Israel in May 2021, three months after schools were reopened. All study hypotheses were confirmed. Findings indicate the need to promote a sense of well-being among Arab teachers in stressful conditions and to design solutions specifically tailored to support them in accordance with their cultural and social characteristics. Israel's Ministry of Education should encourage school administrators to seek ways to provide a supportive environment for Arab teachers in school environments in order to improve their performance and retention, and maintain their well-being.

Keywords: Arab teachers; well-being; school reopening; COVID-19; job demands–resources model; job resource

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1. Introduction

Teachers' well-being (i.e., physical, emotional, mental health) can directly impact their ability to effectively engage and teach their students [1,2]. Poor well-being can lead to burnout, absenteeism, and decreased job satisfaction, which can negatively impact students' engagement and academic performance [3]. Conversely, teachers prioritizing their well-being and maintaining good health are better equipped to provide high-quality education and support students' success [4].

Recent reports on teachers' well-being during the COVID-19 pandemic indicated that their health was impaired [5–7]. According to a study in China, the impact of COVID-19 on teachers' psychological health was associated with factors such as age and gender as well as with the type and location of the school [8].

Once the spread of COVID-19 was under control, governments worldwide began to lift restrictions and allow schools to reopen to reduce the pandemic's negative impact on teachers and students [9]. In Israel, schools reopened in September 2021, amidst adherence to social distancing and mask wearing. After two years of distance teaching, teachers returned to face-to-face interactions with their students while taking precautionary measures to prevent contracting or spreading COVID-19 [10]. However, the return to face-to-face instruction had an impact on teachers' psychological well-being e.g., [11,12]. Educators were confronted with the task of readjusting to in-person, interactive classroom instruction, while simultaneously upholding behaviors designed to prevent the transmission of COVID-19 [13]. Educators were additionally apprehensive regarding the possibility of discrimination if they contracted the virus [14]. Furthermore, instructors had to address

the needs of pupils experiencing emotional and academic disparities [9]. Under such circumstances, educators were susceptible to psychological and emotional pressures, such as depression and loneliness [9,14]. A study conducted in Spain six months after schools reopened there, among 1633 teachers, found that almost half of the teachers had anxiety symptoms and about one-third had symptoms of depression [11]. Anxiety and depression can harm instruction quality as well as teachers' interactions with students; they can also negatively impact teachers' turnover [9]. To sum up, teachers experiencing anxiety and depression brought on by COVID-19 dynamics and conditions made teachers more vulnerable and susceptible to pressures pertinent to their role.

Nevertheless, the impact of school closures as a result of COVID-19 on teachers' emotional well-being has not been widely studied, and only a handful of studies have examined coping among Arab teachers in particular e.g., [15,16]. A cross-sectional study conducted in Jordan during the pandemic, which examined the psychological well-being of 382 Arab teachers, revealed that 69.6% of the participants faced various degrees of psychological distress and disruptions in their psychological well-being [14].

In Israel, only a few studies have examined the Arab teacher minority, in particular, during the pandemic. One study investigated the challenges faced by Arab and Jewish school principals, teachers, and students (N = 579) under distance teaching conditions [16]. However, this descriptive study did not address the well-being or the psychological challenges experienced by the teacher participants. Another recent study examined 929 teachers during COVID-19 in Israel, focusing on cultural differences in stress responses between Arab and Jewish teachers [17]. The study revealed moderate levels of stress among participants related to personal and work-related factors, with Arab teachers experiencing significantly higher degrees of stress compared to their counterparts [17]. Yet these studies did not examine the impact of school reopening on the well-being of Arab teachers upon their return to teaching. Examining this topic is of importance because the reopening of schools after a long closure may have significant consequences for the mental well-being of teachers.

It is vital to acknowledge the various national and minority groups that constitute a society [18]. As such, when examining the effects of the COVID-19 crisis on teachers, especially upon schools reopening, it is crucial to give special attention to the Arab teacher subgroup within the wider educational context in Israel. Doing so will enable the design of culturally sensitive intervention programs for this specific teacher population. Therefore, in the current study, we aim to fill the gap in the literature by examining Arab teachers' well-being in Israel upon the reopening of schools during the COVID-19 pandemic.

2. Literature Review

2.1. The Education System in Arab Society in Israel

Arabs in Israel comprise an ethnic minority constituting about 21.1% of the total population, standing at approximately 1,957,270 people [19]. The majority of Arab citizens in Israel are Muslim (82.9%), with the remainder being either Druze (9.2%) or Christian (7.9%) [19]. Arab society in Israel has undergone a process of modernization in recent years, yet it is still considered predominantly collectivist, male-dominated, and culturally and religiously conservative [20,21].

Overall, public education in Israel includes two major separate systems: the Arab system and the Jewish system [20,22]. The majority of Arab teachers teach mostly in Arab schools under the Ministry of Education's supervision [23,24]. This segregated education system is characterized by discriminatory practices in governmental budgeting, investment, resources, allocations, and outputs [25]. Furthermore, the low economic status of local Arab municipal councils in Israel does not allow for their generous support of Arab schools [26]. Due to these inequalities and the Arab community's marginal status in Israel, a number of challenges for the Arab education system have emerged [26,27]. These challenges include social gaps, inadequate school infrastructure, and lack of eligibility among high school students to take matriculation tests in some areas of the country [20].

The aforementioned disadvantages and disparities experienced by Arab teachers in Israel place additional pressures and demands on them compared to their Jewish counterparts [20,28]. Feelings of alienation, frustration, burnout, and stress are predominant among many Arab teachers in Israel [20,27]. It is reasonable to suggest that these characteristics are related to the functioning and well-being of Arab teachers in Israel and add to the stressors that were evoked by the COVID-19 pandemic, when teachers had to perform under unfamiliar conditions.

2.2. The Current Study

In this study, we examine the well-being of Arab teachers in Israel upon schools reopening during the COVID-19 pandemic by employing the Job Demands–Resources Model (JD–R model) [29], given its suitability for examining teaching contexts and teacher’s professional well-being [30,31]. The JD–R model suggests that demands and resources (both professional and personal) can predict workers’ well-being and performance [32]. Examining the salient job demands and job resources pertinent to teachers’ well-being during the COVID-19 crisis is important for improving teachers’ working environments and well-being in future challenging emergencies, pandemics, and crises affecting educational contexts.

The JD–R model has been found applicable in the context of teaching. A teacher’s career entails job demands including emotionally caring for students, lesson planning, and grading, while job resources include professional development, feedback from peer observations, availability of resources that support teaching and learning, teacher autonomy, and professional development [30]. In recent studies, job resources and job demands were associated with teacher well-being [6,31,33]. Teacher burnout and declining mental health and well-being during the COVID-19 pandemic has been associated with increasing rates of teacher attrition [3]. Studies focusing on early childhood education contexts have found that job demands are a prominent cause of psychological pressure, energy depletion, and high levels of burnout among teachers [34]. A more recent study across Canada indicated that teachers suffered from higher anxiety and distress levels and decreased mental health compared to before the pandemic and compared to non-teachers [35].

According to the JD–R model, working environments and conditions can be categorized as job demands and job resources. Job demands comprise physical, psychological, social, or organizational requirements of the job that can have physical or psychological consequences [32]. Job resources comprise material, psychological, social, or organizational resources that the organization provides to enhance personal ability, learning, work enthusiasm, and work involvement. These two components can result in positive and/or negative implications for employees’ well-being [30]. Individuals experience strain when there is an imbalance between job demands and job resources. A person’s well-being at work is often the result of a balance between these two constructs.

In the coming section, the variables that construct the JD–R model used in this study are introduced and defined in the following order: work–home conflict, resilience, self-efficacy, job support, and over-commitment.

Work–home conflict. An individual’s home life and work life mutually affect each other, and the roles of the individual at home and work can sometimes result in conflicts leading to professional, mental, and physical consequences (i.e., fatigue, underperformance, feeling less qualified and not good at one’s job, job dissatisfaction) [36]. Work–home conflict is defined as the conflict that arises when the demands in one’s work domain are incompatible with the demands in one’s home domain [36]. Opposing work and home pressures make participating and performing in both domains challenging [37]. Work–home conflict may be affected differently by one’s work life vs. one’s private life, and that the context of individuals’ private lives can inform and help explain work–home conflicts [37]. Inexperienced teachers, female teachers, and teachers with babies have more conflicts than other teachers [38]. A study involving 640 teachers revealed that positive reciprocal interactions between work and family, as well as their correlation with

organizational support, were identified. Gender differences were noted, with women exhibiting a more pessimistic outlook on the family's well-being [39]. It was observed that individuals who were able to establish a work–family balance had a more positive perception of their work, indicating that their organization allowed them to manage their work and family demands effectively. Consequently, it is crucial to establish organizational policies that promote the reconciliation of work and family responsibilities [39].

Resilience is broadly defined as the ability to bounce back from stressful events, adversity, or trauma. Recent research on resilience has broadened its focus beyond the personal characteristics of individuals to include the complex dynamic, or “choreography”, between them and their changing personal and external contexts (i.e., community and culture) [40]. According to a recent study on resilience in the age of COVID-19, culture plays a central role in clarifying common belief systems and positive accommodation patterns [41]. Furthermore, individuals' resilience exists on a continuum; namely, it can change during one's life depending on biological, developmental, and cultural factors as well as scientific interventions and purposeful practice on the part of the individual [42]. A recent survey conducted among teachers during COVID-19 examined the impact of the pandemic on their resilience to continue taking part in teaching and learning processes, and mapped teachers' resilience according to internal, interpersonal, and external factors. Resilience in this model was a composite trait that encompassed the people, the socioeconomic system, and the relationships [14]. Resilience is a psychological resource that has the potential to provide long-term benefits, including the ability to recover from life stressors, increase work and life satisfaction, build social capital, foster better relationships, and promote the pursuit of life goals. It is also a positive mechanism that helps prevent harm, compensates for risks, facilitates effective recovery from stressful experiences, and enables individuals to adapt to adversity positively. The resilience theory, [43], is a necessary tool for everyday skills, all age groups, and all psychological situations. Furthermore, the broaden-and-build theory of positive emotions, presented by [44], argues that resilient individuals use positive emotions as fundamental resources to bounce back and find a sense of purpose during stressful situations. According to this model, resilience as an intervention strategy, by cultivating positive emotions, is more than a technique for healing and protecting oneself from distress [45].

Self-efficacy is defined as individuals' perceived belief in their ability to succeed at a particular task in a particular situation [14]. Perceived self-efficacy can affect an individual's goals and commitment to the performance of certain tasks. It can also have cognitive consequences for peoples' responses to failure or their patience in the face of difficulties. In the context of the teaching profession, teachers' self-efficacy is their perceived belief in their capability to encourage and stimulate learning [46,47]. There has been ample research examining teachers' self-efficacy during the COVID-19 pandemic, which has found technology use and virtual instruction to influence teachers' self-efficacy [7,47]. A recent study investigating 150 teachers from six Arab countries during COVID-19 revealed that teachers' self-efficacy in online teaching and learning environments was high. Further, the study revealed that two main factors (receiving support to design online instruction and receiving professional development and support in online teaching), significantly predicted teachers' sense of self-efficacy [48].

Job support is defined as the helpful social interaction available at work from colleagues and supervisors [49]. Recent studies conducted among teachers have found that characteristics of the work environment such as job demands and job support play a vital role in the mental health of early childhood education teachers [50,51]. Studies that examined teachers during COVID-19 found that when they had job support, such as higher agency in their work environment, they experienced better mental health and were likely to report fewer symptoms of depression [52].

Over-commitment is defined as a set of emotions, attitudes, and behaviors that reflect excessive striving, combined with a strong need to receive approval and esteem [53]. Over-committed employees in work situations that demand a great deal of effort and few

rewards are more prone to experiencing strain than less-committed peers, as they respond inflexibly to such situations. Over-commitment is viewed as a dysfunctional motivational pattern and a coping mechanism that has maladaptive consequences, such as emotional exhaustion, and can jeopardize individuals' well-being and performance in stressful and high-workload situations [53,54]. A recent study among French teachers revealed that over-commitment could adversely impact teachers due to a perceived imbalance between effort and reward. Workload and over-commitment were positively associated with emotional depletion and presenteeism (i.e., being present even when ill) and negatively related to job satisfaction and performance [55]. Research indicates that over-commitment serves as a mediator for psychological variables and overall well-being [56,57]. This implies that individuals who invest considerable effort, in terms of time and energy, may be prone to experiencing negative emotions. If extrinsic effort surpasses intrinsic reward, it can have detrimental effects on physical and mental health, ultimately resulting in burnout and decreased psychological well-being [58].

Several cross-sectional studies have been conducted to examine the correlations between psychological factors and the level of well-being experienced by teachers. In a study conducted in Germany, a sample of 5163 respondents was analyzed, revealing significant associations between self-efficacy, work-related stress, health and anxiety, and work–family conflict [59]. Furthermore, a correlation analysis was conducted among a population of 42,412 teachers in China, indicating that work–family conflict, burnout, and resilience were significant predictors of well-being [60]. Work–family conflict has been identified as a significant social determinant of mental health, with bidirectional interference between work and family responsibilities. Previous research has highlighted the influence of work and family stressors, as well as psychosocial variables that affect well-being among teachers [37]. In a study aimed to explore the potential impact of COVID-19-related job demands on the psychological well-being of teachers in Finland and Norway, there was no evidence of increased workload affecting the well-being of teachers [61]. Research acknowledges the cumulative impact of remote work and the subsequent reopening of schools on the mental health of teachers. This effect is attributed to the significant workload and frequent changes that teachers encountered, as well as technological challenges and health concerns. Teachers were required to balance their commitments towards their families and students, resulting in an accumulation of tasks and responsibilities [62].

2.3. Aim of the Study

The aim of the present study was to examine Arab schoolteachers' well-being in Israel upon schools reopening during COVID-19 by applying the JD–R model.

2.4. We Hypothesize the Following

H1. *Home–work conflict and over-commitment among Arab teachers will be negatively associated with well-being.*

H2. *Resilience, self-efficacy, and job support among Arab teachers will be positively associated with well-being.*

H3. *Over-commitment will mediate the association between resilience, self-efficacy, and well-being.*

3. Method

3.1. Procedure

The present study was approved by the Ethics Committee of the chief scientist at Israel's Ministry of Education (Approval no. 11606) and by the first author's university's Ethics Committee (Approval number 011202). A convenience sampling method was used to recruit the study participants, who were invited to take part in a study focused on Arab teachers' coping upon schools reopening during Israel's third wave of COVID-19. The teachers were recruited mainly through internet forums and social media outlets

(i.e., Facebook pages for teachers). A note on these websites contained a short explanation about the study and a link to the questionnaire. To preserve anonymity, participants were not asked to provide any identifying information.

A total of 300 teachers completed the online survey in May 2021. This sample size allowed multiple hierarchical regression for 9 predictors, with low-medium effect size $f^2 = 0.10$, $\alpha = 0.05$, and power of 0.95 (G * Power version 3.1.9.7) [63].

3.2. Measures

3.2.1. Dependent Variable

Well-being was measured via the 14-item Mental Health Continuum-Short Form (MHC-SF) [64]. Respondents were asked to rate the frequency of their feelings of well-being and feelings of distress during the past month on a 6-point Likert scale from 1 (never) to 6 (every day) (e.g., “During the past month, how often have you felt that people are basically good?”). A mean score was calculated; higher scores indicated higher levels of well-being (Cronbach’s $\alpha = 0.91$).

3.2.2. Independent Variables

Resilience was measured via the six-item Brief Resilience Scale (BRS) [65]. This scale taps the individual’s ability to recover from stressful situations. Respondents were asked to rate the extent of their agreement with each item on a 5-point Likert scale from 1 (strongly disagree) to 5 (strongly agree) (e.g., “I usually come through difficult times with little trouble”). After reversing the negative statements, a mean score was calculated; a higher score indicated greater levels of resilience (Cronbach’s $\alpha = 0.78$).

Self-efficacy was measured via the new general self-efficacy scale [66]. Respondents rated the extent of their agreement or disagreement with each of the eight items on a 5-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree) (e.g., “I can meet many challenges successfully”). A mean score was calculated; a higher score indicated greater levels of self-efficacy (Cronbach’s $\alpha = 0.93$).

Job support was measured via the eight-item Job Content Questionnaire (JCQ) [49], tapping the psychological demands, decision latitude, social support, physical demands, and job insecurity pertaining to the social and psychological qualities of the job. Respondents were asked to rate the extent to which they agreed or disagreed with each item on a 4-point Likert scale ranging from 1 (strongly disagree) to 4 (strongly agree) (e.g., “My supervisor is good at getting people to work together”). A mean score was calculated; higher scores indicated higher levels of job support (Cronbach’s $\alpha = 0.74$).

Over-commitment was measured by a six-item over-commitment subscale of the short version of the effort–reward imbalance (ERI) questionnaire [54]. Respondents rated the extent of their agreement with each item on a 4-point Likert scale ranging from 1 (strongly disagree) to 4 (strongly agree) (e.g., “People close to me say that I sacrifice too much for my job”). A mean score was calculated; a higher score indicated higher levels of over-commitment (Cronbach’s $\alpha = 0.73$).

Personal and professional background: Participants were asked to indicate their gender, age, education, marital status, number of children, scope of position, and seniority in teaching.

The study investigated health-related factors and exposure to COVID-19, including participants’ self-reported subjective perception of their health status, adherence to home isolation following a COVID-19 exposure, and feelings of protection against COVID-19 in the workplace.

3.3. Statistical Analyses

Data were analyzed using SPSS and AMOS (ver. 27). Descriptive statistics were used to describe the participants’ demographic characteristics and the research variables. Pearson correlations were calculated to assess the associations between the research variables. The research model was examined with path analysis using AMOS 27. Model fit was assessed

in terms of five indices. Chi-square and normed chi-square (χ^2/df) tests were used to assess the model's overall fit and parsimony. Normed chi-square values of ≤ 2.0 indicate a good fit. We also used the comparative fit index (CFI), the Tucker–Lewis Index (TLI), and the normed fit index (NFI), which are incremental fit indexes. In addition, we employed the root mean-square error of approximation (RMSEA and its confidence interval), which measures the discrepancy per degree of freedom and indicates the model's absolute fit. CFI, TLI, and NFI scores of >0.95 and RMSEA values of <0.05 indicate a good model fit. In addition, indirect effects were evaluated with bootstrapping of 5000 samples, and 95% bias-corrected confidence intervals (95%CI), in order to evaluate the statistical significance of the indirect paths.

4. Results

4.1. Participants

A total of 300 teachers working in Arab public schools throughout Israel participated in the study. Of them, 227 were women (75.66%), and 73 were men (24.33%). The participants ranged in age from 23 to 65 (mean = 40.58, SD = 8.18). Most of the participants were married ($n = 263$, 87.66%) and most of them had children under the age of 18 ($n = 237$, 79%). Most of the teachers ($n = 171$, 57%) had a master's degree, had a two-thirds time position or more ($n = 244$, 81.33%), and had a mean of 16.28 years of seniority in teaching (SD = 8.56, range 1–41). During the study period, the majority of the participants (92%) underwent testing for COVID-19, and more than half of them (56%) indicated they had undergone quarantine since the outbreak of COVID-19. At the time of data collection, approximately 38% of the participants reported feeling unsafe from contracting the virus at their workplace. Additionally, about 64% of the teachers reported caring for elderly parents who needed their assistance (Table 1).

Table 1. Demographic characteristics of the participants ($N = 300$).

		N (%)
Age M (SD)	40.58 (8.18, range 23–64)	
Teaching Seniority M (SD)	16.28 (8.56, range 1–41)	
Gender	Women	227 (75.66)
	Men	73 (24.3)
Marital Status	Married	263 (79)
	Single	23 (7.66)
	Divorced/Widowed	13 (4.33)
Children	Yes. Minors	237 (79)
	Yes. Adults	29 (9.66)
	None	31 (10.33)
Education	Teacher certificate	12 (4.0)
	Undergraduate (bachelor's degree)	115 (38.33)
	Graduate/Post-Graduate	173 (57.66)
Employment Status	Up to two-thirds time	44 (14.6)
	Two-thirds and more	244 (81.3)
Health Status	Reasonable/Bad	17 (5.66)
	Good	65 (21.66)
Disease History	Very Good/Excellent	218 (72.66)
	Yes	35 (11.66)
	No	264 (88)

SD = standard deviation.

4.2. Descriptive Statistics and Correlations between Study Variables

Table 2 summarizes the means, SDs, ranges, and correlates of the study's variables. As can be seen, the means of well-being and self-efficacy were higher than mid-range. The means of resilience and job support were found to be at the center of the range. That is, participants reported moderate-to-high levels of well-being and self-efficacy and moderate

levels of resilience and job support. According to Table 2, positive significant associations were found between well-being, resilience, self-efficacy, and job support, and a negative significant association was found between well-being and over-commitment. That is, the higher the levels of resilience, self-efficacy, and job support, and the lower the levels of over-commitment, the greater the well-being.

Table 2. Correlates, means, SDs, and ranges of study variables ($N = 300$).

Variables	1	2	3	4	5
1. Well-being	-				
2. Resilience	0.26 **	-			
3. Self-efficacy	0.25 **	0.28 ***	-		
4. Job support	0.24 **	0.19 **	0.30 ***	-	
5. Over-commitment	−0.19 **	−0.32 **	0.09	−0.09	-
Mean	4.11	3.16	3.48	3.28	2.91
SD	0.93	0.49	0.65	0.58	0.61
Possible range	1–6	1–5	1–5	1–5	1–5
Actual range	1–6	1.67–5	1.63–5	1.80–5	1.50–5

** $p < 0.01$; *** $p < 0.001$; SD = standard deviation.

In addition, the correlation between seniority in teaching and well-being was significant ($r = 0.15$, $p = 0.012$). Thus, these two variables were included in the model.

4.3. Path Analysis Model for Well-Being

A path analysis model was calculated (Table 3) to assess the various relationships of well-being with seniority in teaching, resilience, self-efficacy, and job support. All continuous variables were standardized. The model was found to fit the data: $\chi^2(9) = 10.22$, $p = 0.333$, $\chi^2/df = 1.14$, NFI = 0.955, NNFI = 0.981, CFI = 0.994, RMSEA = 0.021.

Table 3. Path analysis for the relationships between seniority in teaching, resilience, self-efficacy, job support, and well-being among Arab teachers ($N = 300$).

DV (R^2)	IV	B	SE (B)	p
Over-commitment (0.18)	Resilience	−0.31	0.06	<0.001
	Self-efficacy	0.20	0.06	<0.001
	Job support	−0.08	0.05	0.149
	Seniority	0.14	0.05	0.007
	Resilience	0.12	0.06	0.047
Well-being (0.18)	Self-efficacy	0.16	0.05	0.005
	Job support	0.12	0.05	0.036
	Over-commitment	−0.12	0.06	0.047

Note. Bold values indicate a significant result. DV = dependent variable; IV = independent variable; R^2 = percent of explained variance.

The investigation of variations in the research variables based on gender, marital status (married/unmarried), parental status (having minors/adults or no children), and education level (bachelor's degree and teaching certificate/advanced degrees) did not yield any statistically significant results. Among the research variables, only work seniority was found statistically significant and was therefore included as a control variable.

As can be seen in Table 3, 18% of the variance in teachers' well-being was explained in the model. Negative associations were found between resilience and over-commitment, and a positive association was found between self-efficacy and over-commitment; namely, the lower the self-efficacy, the lower the over-commitment. In addition, positive associations

were found between resilience, self-efficacy, job support, and well-being. Namely, the higher the resilience, the greater the self-efficacy, and the higher the job support, the higher the well-being. A negative association was found between over-commitment and well-being, namely, the lower the over-commitment, the greater the well-being. There is a positive association between teaching seniority (i.e., length of teaching experience and employment) and the mental well-being of teachers, where increased seniority is linked to improved mental health outcomes.

As shown in Table 4, several indirect relationships were found to be significant, involving resilience and self-efficacy as independent variables and over-commitment as a mediator. Higher resilience was associated with lower over-commitment, which in turn was associated with higher well-being. However, higher self-efficacy was associated with higher over-commitment, which in turn was associated with lower well-being (Figure 1).

Table 4. Indirect relationships between resilience, self-efficacy, and well-being ($N = 300$).

DV (R^2)	IV	Standardized Indirect Effect	SE	p	95%CI
Well-being (0.18)	Resilience	0.04	0.02	0.037	0.01, 0.09
	Self-efficacy	−0.02	0.01	0.029	−0.06, −0.01

Note. DV = dependent variable; IV = independent variable.

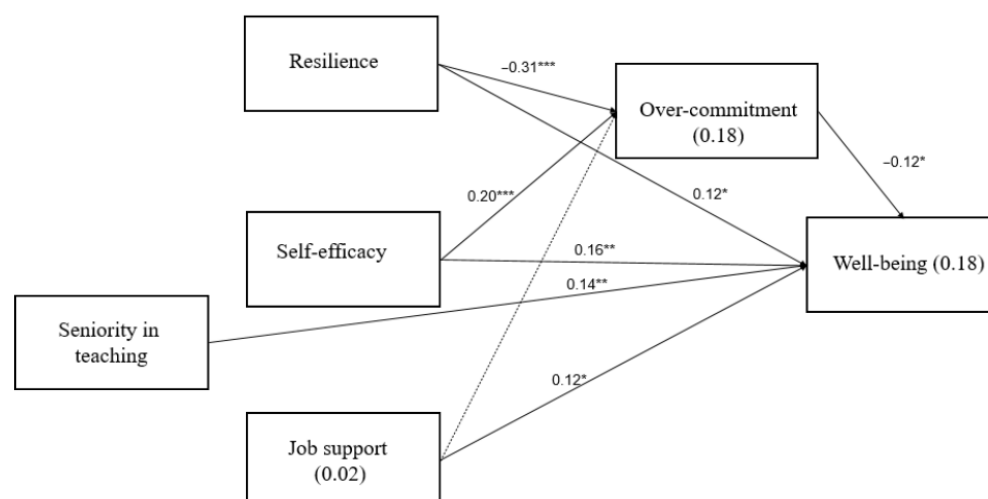


Figure 1. A path analysis model path analysis for the relationships between seniority in teaching, resilience, self-efficacy, job support, and well-being among Arab teachers. The model was found to fit the data: $\chi^2(9) = 10.22$, $p = 0.333$, $\chi^2/df = 1.14$, NFI = 0.955, NNFI = 0.981, CFI = 0.994, RMSEA = 0.021. * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

5. Discussion

The aim of the present study was to examine Arab school teachers' well-being in Israel upon schools reopening during COVID-19 by applying the JD–R model. The findings provide support for the three hypotheses of this study. First, the hypothesis that home–work conflict and over-commitment among Arab teachers negatively associated with well-being was confirmed. In addition, our study confirmed the hypothesis that resilience, self-efficacy, and job support among Arab teachers is positively associated with well-being. Finally, the findings support the hypothesis that over-commitment mediates the association between resilience and self-efficacy and well-being among Arab teachers.

The findings from the current study provide insight into the JD–R model that influenced Arab school teachers during the initial COVID-19 reopening of schools in Israel. Specifically, the results found that increased demands faced by Arab teachers had an impact

on work–home conflict. In addition, the results suggest that teaching demands have led to an increase in Arab teachers overcommitting to job-related tasks. Both work–home conflict and overcommitting to job-related tasks had a negative impact on teacher well-being. Previous studies have found that most Arab teachers often feel stressed due to the pressures and demands on them compared to their Jewish counterparts [20,28]. Feelings of alienation, frustration, burnout, and stress are predominant among many Arab teachers in Israel [20,27]. The Arab community ideals of solidarity, cooperation, commitment, mutual trust, support, and a sense of belonging which they hold [67] may lead them to view their work and family as an integrated entity [68]. Moreover, since Arab teachers come from a collectivist-oriented society, they idealize social commitment and benevolence, even at their own expense [67,69]. The importance of family and community, including the schools in which they work, may very well explain Arab teachers' over-commitment at work in this study. In a previous study, Arab female teachers were found to view their commitment to work at school as an extension of their commitment and loyalty to their home [70]. Hence, one can argue that they might experience an exacerbated sense of work–home conflict, which could in turn, have a negative impact on their sense of well-being. With teachers taking on more challenges upon returning to face-to-face instruction, the current results come as no surprise as they align with previous studies focused on teacher over-commitment [55] and work–home conflict [38].

Furthermore, returning to working at the school may have met Arab teachers' socioemotional needs, to which they responded with increased willingness to over-commit and give more to their jobs [71]. Indeed, Israeli Arab teachers' cultural background, community support, and strong family bonds were found to be a resource when coping with increasing work demands and stressful conditions during COVID-19 [17]. In addition, Arab teachers' resilience may have led them to give more to their teaching fueled by internal and cultural factors to support their students [42].

Additionally, the current results found that self-efficacy and job support were positively associated with teacher well-being. This aligns with previous studies, which found job support to be a critical aspect of teachers experiencing better mental health and fewer symptoms of depression [51,52]. Arabs in general are described as having a communal culture and thereby hold the expectation to share responsibilities and rewards [71]. Therefore, returning to schools may have provided the teachers with a sense of communal job support and heightened self-efficacy which have positively impacted their sense of well-being. Furthermore, it is unsurprising to find a positive connection between self-efficacy and teacher well-being, as higher teacher self-efficacy may make teachers feel better about their teaching and more committed even when facing challenges e.g., [72].

The psychological well-being of educators displays a positive correlation with the level of seniority in their teaching experience, as heightened seniority is associated with a beneficial impact on mental health outcomes. Teachers with lower seniority are usually younger, are generally in the initial phases of creating a family and have younger preschool or young school-aged children [73]. The burden of childcare substantially constrains their capacity to allocate time to alternative pursuits [73]. In addition, studies indicate that advanced teaching seniority has its virtues in that more experienced teachers report more overall contentment and enthusiasm, lower levels of anxiety and depression, stronger professional identity, greater sense of adaptability, and higher levels of commitment [74].

Finally, the results found that over-commitment mediated the relationship between teachers' resilience, self-efficacy, and well-being upon schools reopening during the pandemic. This means that the over-commitment of Arab teachers in Israel plays a significant role in other psychological variables such as resilience, self-efficacy, and well-being especially when coping with stressful times. This comes as no surprise, as it is in line with previous findings that focused on teacher well-being during COVID-19 through factors such as their resilience and self-efficacy. For example, teachers' resilience to continue to be involved in teaching and learning processes was found to encompass the people, the socioeconomic system, and the relationships [42]. Similarly, recent studies that focused on

teachers' self-efficacy during the pandemic found that teachers' self-efficacy decreased and was associated with overall stress and burnout [14,31].

5.1. Implications

Before the COVID-19 pandemic, Arab schools faced limited resources that included inadequate school infrastructure and inequitable funding [26,27], which often led to an increase in frustration, burnout, and stress [20,26]. As Arab teachers returned to frontal classroom teaching during the COVID-19 pandemic, they faced increased and new job demands with limited resources, which may have influenced teacher well-being. It is important to note that teacher self-efficacy and resilience positively impact teacher well-being; thus, school leaders in Israel should focus on these aspects when supporting teacher well-being. Arab teachers who experience home–work conflict should receive training in developing and practicing coping strategies and tools to separate work and their personal lives. To support teacher self-efficacy, Arab school leaders may consider providing formative feedback on their performance, asking teachers about resources needed, including time management skills and supporting teachers through relevant professional development opportunities [48,70].

Additionally, Arab school administrators may provide time for teachers to observe and talk with each other to support vicarious learning or offer peer coaching opportunities that may include formative observations, modeling lessons, and co-teaching lessons. Lastly, school leaders can support teacher well-being as teachers continue to feel high stress levels and burnout. This may be due to the lack of support received through the pandemic or the increase in workloads [12,30]. School leaders must remember this when determining the required tasks asked of teachers.

5.2. Limitations and Future Directions

The current study had some limitations to consider when interpreting the results. First, the current investigation was conducted during the pandemic, and relied on an online self-reported data, leading to subjective descriptions of the participants' health status and their underlying medical conditions. Thus, the findings may not be generalizable to all teachers. Future research should be supplemented with objective measures, such as medical records, to provide a more comprehensive evaluation. Second, this study was cross-sectional and thus represented only one point during the pandemic for a specific group of teachers. More studies are needed to understand the different perspectives of all teachers and situations. Moreover, the impact of the COVID-19 pandemic on the reopening of schools is influenced by various psychological and health-related factors. Therefore, future research should consider a broader examination of variables related to the pandemic, and address them accordingly. Additionally, because the study is cross-sectional, we cannot make inferences about causality. Therefore, more research with cohort study design is required to infer relationships and confirm the stability of our findings. Finally, our findings may be limited to Arab teachers in Israel and may not be generalizable to other teacher population groups. Although the findings of this study aligned with research conducted in common Western cultures, we would encourage future research to explore the constructs of over-commitment, job support, and self-efficacy with a larger and more diverse set of teacher participants.

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